

FORM LETTER ON LETTERHEAD

Date

Consumer Name (or legal guardian or parent if a minor)
Address

RE: HIPAA Complaint

Dear _____:

On _____ (date), you filed a complaint related to the use or disclosure of your PHI with this facility. This letter is to inform you of the results of that complaint.

Our investigation has determined that one of the following actions is recommended (check one):

- | | |
|-------|---|
| _____ | Performance or training need to be improved. |
| _____ | Changes made to the department operating regulations. |
| _____ | New department operating regulation will be written. |

Thank you for the opportunity to address your complaint. We believe this satisfactorily addresses the issue you brought to our attention.

Very truly yours,

Facility Privacy Officer or designee/Central Office PO or designee
Address and PO or designee telephone number